

State: Illinois

Demonstration Name: Illinois/Cook County Care Demonstration

Summary:

According to information from the state, the demonstration provides coverage to adults without dependent children, who have family income at or below 133 percent of the Federal poverty level (FPL), who reside in Cook County, and who are not otherwise eligible for Medicaid. These adults receive benefits through the Cook County Health and Hospital System (CCHHS) and its community partner network providers. CCHHS will coordinate care through Patient Centered Medical Homes.

Fundamental Program Initiatives:

The demonstration supports efforts to develop a provider network in Cook County that will increase capacity to serve the demonstration population, increase the number of services available to the population, and improve the quality of care of services provided.

Population:

There is one population in this demonstration—adults without dependent children, who have family income at or below 133 percent of the FPL, who reside in Cook County, and who are not otherwise eligible for Medicaid. Please see the eligibility section of the fact sheet for this demonstration for more detail.

Approval Date: October 26, 2012

Effective Date: October 26, 2012

Expiration Date: December 31, 2013

Pending Actions: There are no pending actions at this time.

ILLINOIS
SECTION 1115 DEMONSTRATION
FACT SHEET

Program Name: Illinois/Cook County Care (County Care) Demonstration

Initial Application

Date Submitted: January 31, 2012
Date Proposal Approved: October 26, 2012
Date of Implementation: October 26, 2012
Date of Expiration: December 31, 2013

SUMMARY

The demonstration expands Medicaid coverage to adults between 19 and 64 years old, who reside in Cook County and have incomes below 133 percent of the Federal Poverty Level (FPL) and are otherwise not eligible to receive services under the Medicaid program. The demonstration will support efforts to develop a provider network in Cook County that will increase capacity to serve the demonstration population, increase the number of services available to the population, and improve the quality of care of services provided.

ELIGIBILITY

Demonstration eligibles are individuals who:

- Are adults age 19 through 64 years who are not pregnant and do not have a Medicaid-dependent child living in the household;
- Are screened and found not eligible for Medicaid under the state plan, Medicare, or CHIP;
- Have family income at or below 133 percent FPL, or an equivalent standard using a modified adjusted gross income-based (MAGI-based) income determination methodology;
- Reside in Cook County;
- Are U.S. citizens, nationals, or qualified non-citizens; and
- Are not subject to any asset test.

DELIVERY SYSTEM

The demonstration population receives services at CCHHS and their network community providers. The demonstration also provides patient centered medical homes (PCMHs) which are charged with assisting individuals in coordinating care and assisting the participant in obtaining care that will improve health outcomes.

BENEFITS

Demonstration enrollees receive physician and advanced practice nurse services, acute inpatient, outpatient hospital, EPSDT, case management, mental health, alcohol/substance use disorder services, family planning services, home health agency visits, hospice, short term nursing facility, podiatric services, physical, occupational, hearing, and speech therapy, medical supplies, prosthesis, orthoses, clinic services, prescription drugs, emergency/non-emergency transportation, lab and x-ray, and emergency services.

QUALITY AND EVALUATION PLAN

The state's goals under the demonstration are to:

- Provide health care coverage, over the course of the demonstration, to approximately 125,000 currently uninsured Cook County residents;
- Provide previously uninsured individuals with the additional benefit of mental health, substance use disorder services, and prescription services;
- Ensure that services are provided in an effective and coordinated fashion through PCMHs that will ensure that appropriate services are provided in a cost-effective manner for this population;
- Provide comprehensive coverage for individuals not eligible for Medicaid or CHIP
- Expand the network of providers within the CCHHS network to ensure access to services for the demonstration population and build collaborations as the state prepares for expanded coverage in 2014.

The state will test the following hypotheses in its evaluation of the demonstration:

- Expanding Medicaid services to the low-income adult population will improve the quality, coordination, and cost effectiveness of care at CCHHS.
- Expanding eligibility to the currently uninsured low-income adult population will jump-start the enrollment process for the sub-group of individuals who will be newly eligible for Medicaid state plan benefits in 2014.
- Building partnership with community providers such as area FQHCs, mental health and substance use providers will prepare the safety net for the substantial changes that will take place starting in 2014.

COST-SHARING

All demonstration enrollees will be subject to cost-sharing up to cost-sharing levels applied under the Medicaid state plan. The state ensures that any cost-sharing will be nominal, as stipulated in 42 C.F.R 447.54. Standard Medicaid exemptions from cost-sharing, such as family planning services, as stipulated in 42 C.F.R. 447(b) apply to the demonstration.

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